

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	000529-00013
	First Inventor or Application Identifier	Constance M. Hendrickson
	Title	Terpene Ether Developing Solvent for Photopolymerizable Printing Plates

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>	ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
---	---

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27</small> 3. <input checked="" type="checkbox"/> Specification Total Pages 22 4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 5. <input type="checkbox"/> Oath or Declaration Total Pages a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation / divisional w/ box 18 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</small> 6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>) 7. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification or Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies	ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> White Advance Serial No. Postcard 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Cover Page
---	---

22241 U.S. PTO
10/701662



T10603

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☐ Continuation
☐ Divisional
☐ Continuation-in-part (CIP)
of prior application no.:

Prior application information: Examiner: Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. Amend the specification by inserting before the first line the sentence:

☐ This application is a ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)
of application Serial No. Filed on

☐ This application claims priority of provisional application Serial No. Filed

20. CORRESPONDENCE ADDRESS	
BLANK ROME LLP 600 NEW HAMPSHIRE AVENUE, N.W. WASHINGTON, DC 20037 TEL (202) 944-3000 FAX (202) 572-8398	 27557 PATENT TRADEMARK OFFICE

Name: Charles R. Wolfe, Jr.	Registration No.: 28,260
Signature:	Date: November 6, 2003

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 457

Complete if Known

Application Number	To be assigned
Filing Date	November 6, 2003
First Named Inventor	Constance M. Hendrickson
Examiner Name	To be assigned
Group / Art Unit	To be assigned
Attorney Docket No.	000529-00013

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:		3. ADDITIONAL FEES	
Deposit Account Number	23-2185	Large Entity	Small Entity
Deposit Account Name	BLANK ROME LLP	Fee Code	Fee Code
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17		Fee (\$)	Fee (\$)
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
2. <input checked="" type="checkbox"/> Payment Enclosed:			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other			
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity	Small Entity		
Fee Code	Fee Code		
Fee (\$)	Fee (\$)		
		Fee Description	Fee Paid
101	770	201	385
106	340	206	170
107	530	207	265
108	770	208	385
114	160	214	80
SUBTOTAL (1)			(\$ 385.00)
2. EXTRA CLAIM FEES			
Total Claims	28	-20**	= 8
Independent Claims	2	-3**	= 0
Multiple Dependent			
Extra Claims	8	Fee from below	\$9
Fee Paid	\$72		
Fee Paid	\$0		
Fee Paid	\$0		
Large Entity	Small Entity		
Fee Code	Fee Code		
Fee (\$)	Fee (\$)		
		Fee Description	Fee Paid
103	18	203	9
102	86	202	43
104	290	204	140
109	86	209	42
110	18	210	9
SUBTOTAL (2)			(\$ 72)
**or number previously paid, if greater; For Reissues, see above			
BLANK ROME LLP			
600 NEW HAMPSHIRE AVENUE, N.W.			
WASHINGTON, DC 20037			
TEL (202) 772-5800 FAX (202) 572-8398			



27557

PATENT TRADEMARK OFFICE

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Charles R. Wolfe, Jr.	Registration No./ Attorney/Agent)	28,680
Signature		Telephone	202-944-3000
		Date	November 6, 2003